

2022 BENEFIT OPTIONS - COBRA RATES

Health Plans – Premiums Per Month		
CARRIERS - BLUECROSS BLUESHIELD of ARIZONA and UNITEDHEALTHCARE offer both plans.		
TRIPLE CHOICE PLAN	HIGH DEDUCTIBLE HEALTH PLAN with HEALTH SAVINGS ACCOUNT	
\$675.45 - EMPLOYEE ONLY	\$422.38 - EMPLOYEE ONLY	
\$1,432.60 - EMPLOYEE + SPOUSE	\$896.23 - EMPLOYEE + SPOUSE	
\$959.44 - EMPLOYEE + 1 CHILD	\$599.08 - EMPLOYEE + 1 CHILD	
\$1,679.96 - FAMILY	\$1,048.06 - FAMILY	

Dental Plans – Premiums Per Month			
PLANS			
PPO – DELTA DENTAL	DHMO - CIGNA DENTAL CARE ACCESS	5*	
\$36.66 - EMPLOYEE	\$8.69 - EMPLOYEE	*Coverage not available in	
\$77.14 - EMPLOYEE + SPOUSE	\$17.38 - EMPLOYEE + SPOUSE	AK, ID, ME, MT, NH, NM, ND, PR,	
\$61.69 - EMPLOYEE + 1 CHILD	\$16.92 - EMPLOYEE + 1 CHILD	SD, VT, USVI, WV, and WY.	
\$120.63 - EMPLOYEE + FAMILY	\$26.05 - EMPLOYEE + FAMILY		

Vision Plan – Premiums Per Month	
COVERAGE - AVESIS ADVANTAGE PROGRAM	
\$3.79 - EMPLOYEE \$12.61 - EMPLOYEE + SPOUSE \$12.48- EMPLOYEE + 1 CHILD \$15.71 - EMPLOYEE + FAMILY	
\$12.61 - EMPLOYEE + SPOUSE	
\$12.48- EMPLOYEE + 1 CHILD	
\$15.71 - EMPLOYEE + FAMILY	

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